Oncology bulletin

September 2026

The aim of this current awareness bulletin is to provide a digest of recent guidelines, reports, research and best practice on Oncology

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Commissioning Care

Review
Aligning awareness, systems and policy to increase equitable access to genomically driven cancer care
Abstract - Genomic testing has the potential to transform cancer care across the patient pathway. However, its benefits remain unevenly realised across populations and health systems. Precision oncology is characterised by a strong promissory discourse, with expectations of improved outcomes and cost-effectiveness, yet real-world implementation remains variable and context dependent.
Kelly Kohut et al
BMJ Oncology 5 (2) e000856 (open access)
10.1136/bmjonc-2025-000856

General

Editorial
Decentralised oncology trials: decentralisation as a tool, not the goal
Jordan E Cohen et al
BMJ Oncology 5 (2) e001255 (open access)
10.1136/bmjonc-2026-001255

Review
Consent for research use of tissue in adult oncology care: a systematic scoping review of patient perspectives, preferences and pathway implications
Abstract - Tissue collected during adult oncology care is central to translational research and precision oncology. However, consent for research use is often sought within complex diagnostic, surgical and treatment pathways, where timing, trust and information needs may shape how patients understand and experience the decision.

Gerard Mawhinney et al
BMJ Connections Oncology 3 e000155 (open access)
10.1136/bmjconc-2026-000155

Specific Cancers

Technology appraisal guidance
Durvalumab with platinum-based chemotherapy, then with or without olaparib, for untreated advanced or recurrent endometrial cancer
NICE Guidance TA 1190

Technology appraisal guidance
Mirdametinib for treating symptomatic and inoperable plexiform neurofibromas associated with neurofibromatosis type 1 in people 2 to 17 years
NICE Guidance TA 1192

Technology appraisal guidance
Ibrutinib with R-CHOP for untreated mantle cell lymphoma when a stem cell transplant is suitable
NICE Guidance TA 1193

Technology appraisal guidance
Isatuximab with pomalidomide and dexamethasone for treating relapsed and refractory multiple myeloma
NICE Guidance TA 1194

Technology appraisal guidance
Daratumumab with bortezomib, lenalidomide and dexamethasone for untreated multiple myeloma when a stem cell transplant is suitable
NICE Guidance TA 1195

FEATURE
Daraxonrasib: How soon could the new drug for pancreatic cancer be available in the UK?
The US Food and Drug Administration has just approved a new treatment for metastatic pancreatic cancer after a phase 3 trial showed it doubled life expectancy. What do we know about daraxonrasib, and when will it be available in the UK?
Katharine Lang
BMJ 394 (8497) e100870
10.1136/bmj-2026-100870

Original research
Ipsilateral recurrences after kidney sparing surgery for upper tract urothelial carcinoma: a systematic review and meta-analysis

Objectives - Ipsilateral recurrence is a relevant outcome measure after kidney-sparing surgery (KSS) for urothelial upper tract carcinoma (UTUC). However, studies comparing ipsilateral recurrence after segmental ureterectomy (SU) and endourological treatment (ET) are lacking. This study aimed to quantitatively assess ipsilateral recurrence in ET and SU for UTUC to inform patient counselling and future study design.
Elin Ståhl et al
BMJ Oncology 5 (2) e001138 (open access)
10.1136/bmjonc-2026-001138

Article
Adjuvant alectinib versus chemotherapy in resected ALKpositive non-small-cell lung cancer (ALINA): health-related quality-of-life and safety outcomes from a randomised, open-label, phase 3 trial
Background - For patients with resected, ALK-positive non-small-cell lung cancer (NSCLC), adjuvant alectinib significantly improved disease-free survival versus platinum-based chemotherapy in the global, phase 3, open-label, randomised ALINA trial. We report safety and health-related quality-of-life (HRQoL) outcomes from the ALINA trial.
Rafal Dziadziuszko et al
Lancet Oncology 27 (9) 1110-1119 (open access)
10.1016/S1470-2045(26)00283-4

Article
Chemoradiotherapy versus short-course radiotherapy for response-adapted organ preservation in early-stage and intermediate-stage rectal cancer (STAR-TREC): 12-month results of an international, multicentre, open-label, parallel-group, randomised, phase 2/3 trial
Background - Total mesorectal excision (TME) is the standard treatment for most early-stage and intermediate-stage rectal cancer but can cause substantial perioperative morbidity, functional impairment, and reduced quality of life. We assessed whether long-course chemoradiotherapy (LCCRT) or short-course radiotherapy (SCRT) could increase organ preservation and reduce surgery, toxicity, and quality-of-life harms without compromising oncological outcomes.
Simon P Bach et al
Lancet Oncology 27 (9) 1120-1132 (open access)
10.1016/S1470-2045(26)00228-7

Original research
Cytotoxic T-cell exhaustion analyses by in situ single-cell immunofluorescence in relation to colorectal cancer patient age, tissue bacteria and mortality
Objectives - We hypothesised that cytotoxic T-cell exhaustion status in colorectal cancer (CRC) microenvironment relates to age of diagnosis (eg, early-onset CRC), pathogenic bacteria and clinical outcomes.
Nobuhiro Nakazawa et al
BMJ Oncology 5 (2) e001159 (open access)
10.1136/bmjonc-2026-001159

Original research

Active surveillance for a small low-risk papillary thyroid cancer: a 10-year prospective, observational study in an Italian tertiary care centre

Objective - To evaluate the long-term safety and feasibility of active surveillance (AS) for Italian patients with low-risk papillary thyroid microcarcinoma (mPTC) and to analyse trends in patient enrolment and factors associated with discontinuation of surveillance. This study represents the first prospective European investigation with long-term follow-up assessing AS for mPTC.

Eleonora Molinaro et al
BMJ Oncology 5 (2) e001154 (open access)
10.1136/bmjonc-2026-001154